

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hidetoshi KOIKE et al.

Title: SEMICONDUCTOR DEVICE AND METHOD OF

FABRICATING THE SAME

Prior Appl. No.: 10/097,382

Prior Appl.

Filing Date: 03/15/2002

Examiner: Unassigned

Art Unit: Unassigned



## **CONTINUING PATENT APPLICATION** TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[ ] Continuation [ X ] Division [ ] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

## Enclosed are:

- [X]Specification, Claim(s), and Abstract (26 pages).
- [X]Formal drawings (20 sheets, Figures 1-20C).
- [ X ] Declaration and Power of Attorney (3 pages).
- [X]Information Disclosure Statement.
- [X]Form PTO/SB/08.

- [X] Preliminary Amendment.
- [X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims		Included in	1	Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee							\$770.00		\$770.00
Total Claims:	11	-	20	=	0	x	\$18.00	=	\$0.00
Independ ents:	4	-	3	_ =	1	x	\$86.00	=	\$86.00
If any Multiple Dependent Claim(s) present: + \$290.00								=	\$0.00
SUBTOTAL:								=	\$856.00
[ ] Small Entity Fees Apply (subtract ½ of above):								=	\$0.00
TOTAL FILING FEE:								=	\$856.00

- [X] A check in the amount of \$856.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date October 2, 2003

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Respectfully submitted,

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